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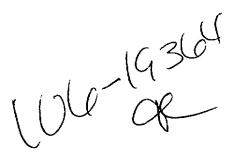
(Requestor's Name)
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(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Business Entity Name)
(Document Number)
Certified Copies Certificates of Status
Special Instructions to Filing Officer:

Office Use Only



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02/20/06--01029--009 **130.00



COVER LETTER

TO: Registration Section Division of Corporations	
SUBJECT: Willam Kimmons Painting LLC (Name of Limited Liability Company)	
The enclosed Articles of Organization and fee(s) are submitted for filing.	
Please return all correspondence concerning this matter to the following:	
William Kimmons	
(Name of Person)	
William Kimmons Painting LLC	
(and company)	
4237 ELvis Presley Drive (Address) Milton, Florida 32583 (City/State and Zin Code)	
(riumss)	
Milton Florida 32583	
(City/State and Zip Code)	
For further information concerning this matter, please call:	
WilLiam Kimmons at 850 225-1733 (Name of Person) (Area Code & Daytime Telephone Number)	
(Name of Person) (Area Code & Daytime Telephone Number)	
Enclosed is a check for the following amount:	
\$125.00 Filing Fee \$\ \$\ \$\ \$\ \$\ \$\ \$\ \$\ \$\ \$\ \$\ \$\ \$\	
	_
(additional copy is enclosed)	
	-
Mailing Address Registration Section Division of Corporations Street/Courier Address Registration Section Division of Corporations	
P.O. Box 6327 Clifton Building Tallahassee, FL 32314 2661 Executive Center Circle	
Tallahassee, FL 32301	

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:

William Kimmons	Painting LLC
(Must end with the words "Limited Liability C	Company, "Limited Company" or their abbreviation "LLC," or "L.C.,")
ARTICLE II - Address:	
	ress of the principal office of the Limited Liability Company is:
•	
Principal Office Address:	Mailing Address:
4237 Elvis Preskey milton, FLorida 3	Drive 4237 Elvis Preskey Drive 32583 milton, Florida 32583
(The Limited Liability Company cannot serve business entity with an active Florida registra	,
The name and the Florida street add	- -
William	Kimmons
	Name
4237 E	Luis Preskey Drive
	lorida street address (P.O. Box NOT acceptable)
milton	City, State, and Zip
	City, State, and Zip
liability company at the place de registered agent and agree to act ir	agent and to accept service of process for the above stated limited esignated in this certificate, I hereby accept the appointment as this capacity. I further agree to comply with the provisions of all complete performance of my duties, and I am familiar with and

(CONTINUED)
Page 1 of 2

<u>Title:</u> "MGR" = Manager "MGRM" = Managing Mer	Name and Address:
MG-RM manasing member	William Kimmons 4237 Elvis Presley Drive Milton, Flortda 32583
(Use attachment if necessar	ury)
effective date is listed, the da	her than the date of filing: (OPTIONAL ate must be specific and cannot be more than five business days
0 days after the date of filing	ıg.)
·	\ \\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\
REQUIRED SIGNATUR	Man L. Kinnoro
REQUIRED SIGNATUR Signature (In according this does	RE: Composition Compositi

Filing Fees:

\$125.00 Filing Fee for Articles of Organization and Designation of Registered Agent
\$ 30.00 Certified Copy (Optional)
\$ 5.00 Certificate of Status (Optional)

ARTICLE IV- Manager(s) or Managing Member(s):